DELPHI

FACILITY INVESTIGATIVE REPORT

APPENDIX A SECTION 7

CONT. SOIL REMEDIATION CLOSURE REPORT

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Analysis Request and Chain of Custody Record ORANGE COAST ANAL TICKL, INC.

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3002 Dow, Suite 532	K	905.
Tustin, CA 92780	E	1
(714) 832-0064, Fax (714)	832-0067	, ,

4620 E. Elwood, Suite 4 Phoenix, AZ 85040 (602) 736-0960 Fax (602) 736-0970

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Analysis Request and Chain of Custody Record

ORANGE COAST ANALYTICAL, INC.

3002 Dow, Suite 532 Tustin, CA 92780 (714) 832-0064, Fax (714) 832-0067 4620 E. Elwood, Suite 4 Phoenix, AZ 85040 (602) 736-0960 Fax (602) 736-0970

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Analysis Request and Chain of Custody Record

ORANGE COAST ANALYTICAL, INC.

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Analysis Request and Chain of Custody Record

ORANGE COAST ANALYTICAL, INC.

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4620 E. Elwood, Suite 4 Phoenix, AZ 85040 (602) 736-0960 Fax (602) 736-0970

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EXHIBIT E SOIL DISPOSAL MANIFESTS

Printed/Typed Name 19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19

Day

DO NOT WRITE BELOW THIS LINE.

TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS. (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

CENTER

See Instructions on back of page 6.

Department of Toxic Substances Control Sacramento, California

4	UNIFORM HAZARDOUS	1. Generator's US EPA ID N	o. Ma	nifest Document	No.	2. Page 1		the shaded areas by Federal law.
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+	3. Generator's Name and Mailing Address		-1-1-17 1-1-		A Sign	onifest Occument N	umber	
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1	9. Designated Facility Name and Site Address ILONE MOUNTAIN FA	CILITY POIL	PAID Number BOX	170				
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	11. US DOT Description (including Proper Shippin	ng Nafile, Pigzard Class, and IL	Number]	12. Con	ainers.	13. Total	14. Unit Wt/Vol	
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	marked, and labeled, and are in all respects	in proper condition for transp	ort by highway according	to applicable i	nternationa	and national gover	nment regulation	ons.
	If I am a large quantity generator, I certify t	hat I have a program _e in place	to reduce the volume di	nd toxicity of wo	iste general	ed to the degree I h	ave determined	to be economically
	practicable and that I have selected the pract and the environment; OR, if I am a small qu	ticable method of freatment, st antity generator, I have made	a good faith effort to m	nimize <mark>my w</mark> ast	e generatio me wnich i	n and select the bes	t waste manag	ement method that is
	available to me and that I can afford. Printed/Typed Name	Sin	nature/				Month	Day Year
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•	20. Facility Owner or Operator Certification of a	eceipt of hazardous materials o	overed by this manifest e	xcept as noted i	n Item 19.	70.		
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DO NOT WRITE BELOW THIS LINE.

THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALFORNIA, CALL 1-800-852-7550

CASE OF EMERGENCY OR SPILL, CALL

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21. Generator's US EPAID No.

MANIFEST

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Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.

(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

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